

DATE: _____

09- _____

**CITY OF CANTON
RESIDENTIAL DECK
ZONING APPLICATION FORM
50.00 FEE**

PLOT PLAN

JOB ADDRESS: _____

OWNER: _____

PHONE # () _____

EMAIL: _____

SIZE of DECK: _____

PROJECT COST: _____

ZONING DISTRICT: _____

PROPERTY LINE SETBACKS: 5' SIDE / 20' REAR

FRONT: _____ REAR: _____

SIDE: _____ SIDE: _____

LOCATION of DECK: FRONT / REAR / SIDE

TYPE of DECK MATERIAL: _____

CONTRACTOR INFORMATION: COMPANY: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # () _____ FAX # () _____

EMAIL: _____

SIGNATURE: _____

(Owner, Agent, Contractor)

**OWNER / CONTRACTOR IS RESPONSIBLE TO VERIFY ALL PROPERTY LINES!
MINIMUM SETBACKS: 5' FROM SIDE PROPERTY LINES / 20' FROM REAR PROPERTY LINES
RESIDENTIAL DECK BUILDING PERMIT FEE: \$50.50**